

POSITION	INITIALS	ID NO.	DATE
100			
FEE DETERMINATION	75		8/14/00
O.I.P.E. CLASSIFIER		48	8/17/00
FORMALITY REVIEW	2A	5C583	09/21/00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	05/06/02 07/03
2	02/02/03 04/04
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11	✓
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31	✓
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33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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